

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fresenius Medical Care North America PAC

ADDRESS (number and street)

801 Pennsylvania Avenue, NW

Suite 255

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00401299

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric Bishop

Signature of Treasurer

Eric Bishop

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
10 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		93762.04
(b) Cash on Hand at Beginning of Reporting Period.....	97841.57	
(c) Total Receipts (from Line 19)	9109.01	150481.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	106950.58	244243.14
7. Total Disbursements (from Line 31)	16673.05	153965.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	90277.53	90277.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 10 01 2015

To:

 M M / D D / Y Y Y Y Y
 10 31 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7552.29

118595.00

(ii) Unitemized

1383.67

31193.42

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

8935.96

149788.42

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

8935.96

149788.42

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

173.05

692.68

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

9109.01

150481.10

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

9109.01

150481.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	173.05	2465.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	173.05	2465.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	151500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16673.05	153965.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16673.05	153965.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8935.96	149788.42
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8935.96	149788.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	173.05	2465.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	173.05	692.68
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	1772.93

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Amendment to correct inaccurate Line 15 and Line 17 totals.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 46

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Douglas G. Kott

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4230.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A70135B2FA05C49AA9AB

Amount of Each Receipt this Period

384.60

Payroll Deduction: \$384.60/

Full Name (Last, First, Middle Initial)

B. Beth Britton

Mailing Address PO Box 113

City

Graham

State

NH

Zip Code

03753-0113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RN, Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A3C93C206F61B4A83A96

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

C. Kristi Wells

Mailing Address 32423 Schoolcraft Rd

City

Livonia

State

MI

Zip Code

48150-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A9F2E216A5F5C49F788E

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

453.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Paul Smith

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director Biomedical Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A6A7CFEA6738248009EB

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Grant Asay

Mailing Address 1421 Champion Forest Ct

City

Wheaton

State

IL

Zip Code

60187-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A767DD2641A934ED9AF9

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

C. Stephanie DeFranco

Mailing Address 525 Sycamore Dr

City

Milpitas

State

CA

Zip Code

95035-7429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, New Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A29BD0633C75045A0A69

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Wm Gary Livesay

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A0492EE771597446E84A

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Gordon Jee

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr Manager, Product Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A64610E9ABE8E424E858

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

C. Maria BurkeMailing Address 129 W Trade St
Ste 1050

City

Charlotte

State

NC

Zip Code

28202-5303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A051F72D424124CDBBC8

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

SUBTOTAL of Receipts This Page (optional)..... ►

118.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donna M Painter

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AB294F2566E6B4AAC91E

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

B. Karen Butler

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Director Clinical Technology Tr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A52DB04D4AB494397AF2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. Matthew D Kinser

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A86C283EEB4564D79BE0

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional)..... ►

126.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Terri Carlton

Mailing Address 1534 N Hoskins Rd

City

Charlotte

State

NC

Zip Code

28216-3602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A8443D150636144DB9C9

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

B. Edda SpinelliMailing Address 511 N Brookhurst St
Ste 100

City

Anaheim

State

CA

Zip Code

92801-5229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A20D683F2A41A4F18A12

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

Full Name (Last, First, Middle Initial)

C. Domenic Gaeta

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A2441F3819F2C46C8A6C

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional)..... ►

98.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jayme Patterson

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A0A7D99F9171A4585AAC

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

Full Name (Last, First, Middle Initial)

B. William McKinney

Mailing Address 2901 Via Fortuna
Ste 600

City

Austin

State

TX

Zip Code

78746-7710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President, Fresenius Health Partners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A29254D1DA274438B871

Amount of Each Receipt this Period

140.00

Payroll Deduction: \$140.00/

Full Name (Last, First, Middle Initial)

C. Donald N Cantalupo

Mailing Address 100 Paterson Plank Rd
Apt 313

City

Jersey City

State

NJ

Zip Code

07307-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RSM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A854AB74E2FB0427E98E

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Cynthia LaMunyonMailing Address 225 E Germann Rd
Ste 230

City	State	Zip Code
Gilbert	AZ	85297-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr. Director of Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A047C76E5498141FF993

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

B. Michelle Cowens

Mailing Address 516 Goldenwest St

City	State	Zip Code
Huntington Beach	CA	92648-2639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President, Physician Practice Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AD3749F07A3CD43169DC

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Barbara WilliamsMailing Address 5251 Dtc Pkwy
Ste 700

City	State	Zip Code
Greenwood Village	CO	80111-2736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A462CCF2090B24C0F9D9

Amount of Each Receipt this Period

8.00

Payroll Deduction: \$8.00/

SUBTOTAL of Receipts This Page (optional)..... ►

114.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Liam WalshMailing Address 1875 I St NW
FI 12

City	State	Zip Code
Washington	DC	20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1474.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A417687EC1B724A0991D

Amount of Each Receipt this Period

134.00

Payroll Deduction: \$134.00/

Full Name (Last, First, Middle Initial)

B. Katrina Demlow

Mailing Address 3300 Vista Way

City	State	Zip Code
Oceanside	CA	92056-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : ABFBBF55824D249CFA61

Amount of Each Receipt this Period

23.10

Payroll Deduction: \$23.10/

Full Name (Last, First, Middle Initial)

C. Jenny Lee Fischer

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A5C635626BF1F46F2B2C

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Deanna L Patterson

Mailing Address 8688 Broadway

City

Merrillville

State

IN

Zip Code

46410-7034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A8314938B55F6404FA0D

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Catherine Dubinsky

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Operations Integrity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : AB25CCD5C348F4F1AADB

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Joseph Winslow

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Quality Systems & Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : AA45D63F2AEC84BBEAF

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$80.00/

SUBTOTAL of Receipts This Page (optional)..... ►

176.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Patrick McCarthy

Mailing Address 82 Belcher Dr

City

Sudbury

State

MA

Zip Code

01776-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : ADA45D965805644CF832

Amount of Each Receipt this Period

240.00

Payroll Deduction: \$240.00/

Full Name (Last, First, Middle Initial)

B. Mark R Fawcett

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AAFCC166C7357444A5D

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

C. Christine McLean

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager A/R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A39ED0A25F026478D8B0

Amount of Each Receipt this Period

19.24

Payroll Deduction: \$19.24/

SUBTOTAL of Receipts This Page (optional)..... ►

297.70

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Carol A Ernst

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AC2598E2908CE43CAA49

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

B. K. Brett Heiner

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Distribution Center Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AA9A9A9D2EBDD4ED2AB

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. Peter Sauer

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President - Fresenius Health Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A440B050E19B044F1888

Amount of Each Receipt this Period

110.00

Payroll Deduction: \$110.00/

SUBTOTAL of Receipts This Page (optional)..... ►

206.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Hymes

Mailing Address 750 Old Hickory Blvd
Ste 230

City State Zip Code
Brentwood TN 37027-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A31ABB4730CAC4366B5B

Amount of Each Receipt this Period

200.00

Payroll Deduction: \$200.00/

Full Name (Last, First, Middle Initial)

B. David Sweet

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
Director, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A68A4274F019F49E3B77

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. William Crawford

Mailing Address 100 Galleria Pkwy SE
Ste 1200

City State Zip Code
Atlanta GA 30339-5954

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : AFC0798D1B3CA4031B43

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

258.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Manikandan Pandi

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AD8B9C7D93D624BBFB67

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

B. Nancy Diane Carter

Mailing Address 1607 Revella Arch

City	State	Zip Code
Chesapeake	VA	23322-6991

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Physician Contracting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AEE2E69665ED04E81BC8

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

C. Robert D CrickMailing Address 3501 Moyers Cir
Ste 200

City	State	Zip Code
Masonic Home	KY	40041-9035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A1A8C3874264146DD9ED

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ►

126.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. James G Fowlds

Mailing Address 3545 Wilshire Blvd
Ste 103

City State Zip Code
Los Angeles CA 90010-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : AEC3A9AD024894082A04

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

B. Geronia F Parlier

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP UltraCare Customer Connection

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : A73AF100F0D83495BB6E

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

C. Linda Sherman

Mailing Address 12120 Plum Orchard Dr
Ste 140

City State Zip Code
Silver Spring MD 20904-7820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Home Therapies Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : AE44B285940B246D1B82

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional)..... ►

96.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Kristine Pace

Mailing Address 711 E Jefferson St

City State Zip Code
Oak Grove LA 71263-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A6F8326BA3DB44FBEBBA2

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Jessica Orlando

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.66

Date of Receipt

10 / 30 / 2015

Transaction ID : AD86D4A4D91B14087A48

Amount of Each Receipt this Period

23.06

Payroll Deduction: \$23.06/

Full Name (Last, First, Middle Initial)

C. James Easterbrook

Mailing Address 4646 N Greenview Ave
Unit 10

City State Zip Code
Chicago IL 60640-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A3D9299D04A764A198CE

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Andrew HolsteinMailing Address 630 W Germantown Pike
Ste 100

City	State	Zip Code
Plymouth Meeting	PA	19462-1069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A816836D6FBAA44E58B1

Amount of Each Receipt this Period

35.00

Payroll Deduction: \$35.00/

Full Name (Last, First, Middle Initial)

B. Steven P Covino

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AE7E3EE396D7E49FEA22

Amount of Each Receipt this Period

96.16

Payroll Deduction: \$96.16/

Full Name (Last, First, Middle Initial)

C. Paul ZabetakisMailing Address 1875 I St NW
FI 12

City	State	Zip Code
Washington	DC	20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President, RRI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AFB603E026334E8B8F2

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

SUBTOTAL of Receipts This Page (optional)..... ▶

208.08

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert Sepucha

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4230.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AE521B9CBFA8B4591BEF

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

B. Christopher Fonvielle

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AABCCC19B161547B9B16

Amount of Each Receipt this Period

24.00

Payroll Deduction: \$24.00/

Full Name (Last, First, Middle Initial)

C. William Fink

Mailing Address 32 Hartwell Ave

City

Lexington

State

MA

Zip Code

02421-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP, ITG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : A6278D3138840471C8AF

Amount of Each Receipt this Period

100.00

Payroll Deduction: \$100.00/

SUBTOTAL of Receipts This Page (optional)..... ►

508.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jason GraysonMailing Address 5100 N Brookline Ave
Ste 275

City	State	Zip Code
Oklahoma City	OK	73112-3603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A1A2EBEA16CC14057BAC

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Mignon Early

Mailing Address 124 Verdae Blvd

City	State	Zip Code
Greenville	SC	29607-3843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AC6D2F311C6F04C13819

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

Full Name (Last, First, Middle Initial)

C. John Baldasaro

Mailing Address 32 Hartwell Ave

City	State	Zip Code
Lexington	MA	02421-3103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP ITG Revenue Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AABD88329F1DE47089A4

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Alexander TurfeMailing Address 920 Winter St
Ste 4346

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A50D9CB5A46A649C9BDC

Amount of Each Receipt this Period

230.78

Payroll Deduction: \$230.78/

Full Name (Last, First, Middle Initial)

B. Gregory GarzaMailing Address 2020 E 1st St
Ste 110

City	State	Zip Code
Santa Ana	CA	92705-4029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President Integrated Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AC2A98AE0EFCE402A919

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

Full Name (Last, First, Middle Initial)

C. Janice D Lindsay

Mailing Address 111 Elizabeth Street

City	State	Zip Code
Clinton	NC	28323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AB286036E93F14C56B9F

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional)..... ►

290.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Joseph MarinoMailing Address 5251 Dtc Pkwy
Ste 500

City	State	Zip Code
Greenwood Village	CO	80111-2734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr Director, Joint Venture Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A6962AAD5EED84EBDB75

Amount of Each Receipt this Period

19.24

Payroll Deduction: \$19.24/

Full Name (Last, First, Middle Initial)

B. Michelle Gazella

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A16C4A59BCB3B4328A08

Amount of Each Receipt this Period

27.00

Payroll Deduction: \$27.00/

Full Name (Last, First, Middle Initial)

C. Constance Torrey-Romanus

Mailing Address 3300 N Main St

City	State	Zip Code
Peoria	IL	61611-1562

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A5CD404FEF06E4CB49B3

Amount of Each Receipt this Period

11.53

Payroll Deduction: \$11.53/

SUBTOTAL of Receipts This Page (optional)..... ►

57.77

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Lisa Dombro

Mailing Address 927 Prairie Ave

City	State	Zip Code
Park Ridge	IL	60068-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4230.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A8C56D290D41746FF82E

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

B. Allen MillsMailing Address 210 N Church St
Unit 2914

City	State	Zip Code
Charlotte	NC	28202-2387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A7EC77D20A55D4767931

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Monica Cobb

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A2D9E7E8A83EB4BAC83C

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Terry L Ketchersid

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A874C296F48694F8B88D

Amount of Each Receipt this Period

200.00

Payroll Deduction: \$200.00/

Full Name (Last, First, Middle Initial)

B. Kathleen Kawa

Mailing Address 90 Glacier Dr

City

Westwood

State

MA

Zip Code

02090-1818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Director of Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A69CD42AD087344BA969

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

C. Steve Shaw

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : AF02FA15EC9974920B61

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Michael Ramsey

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : AA4EFE573E1EF4B4F935

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

Full Name (Last, First, Middle Initial)

B. Barry M Doherty

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Deployment Project Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A5023D8A9622E4FA5BDC

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. Nicole Devore

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A65404AD323DF4DACBA1

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ▶

96.92

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. James W SwannMailing Address 3725 National Dr
Ste 130

City	State	Zip Code
Raleigh	NC	27612-4072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Development & Certificate of Need

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AFED08745A5424732BC7

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. William Perry

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AF89D0A0649684BFFB80

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

C. Geoff Higginbotham

Mailing Address 7581 NW 23rd St

City	State	Zip Code
Pembroke Pines	FL	33024-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Finance RECS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : AEF6A52E710B64439903

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ▶

108.46

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert P. Loeper

Mailing Address 1875 I St NW
 FI 12

City State Zip Code
 Washington DC 20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

10 / 30 / 2015

Transaction ID : AB9476338C0864A6B8DF

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

B. Marion Andersen

Mailing Address 475 W 13th St

City State Zip Code
 Ogden UT 84404-5554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Principal Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

10 / 30 / 2015

Transaction ID : AC8BB0E4D2E4D439A59

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

Full Name (Last, First, Middle Initial)

C. Nelson Coimbre

Mailing Address 2219 Hollywood Blvd
 Ste 101

City State Zip Code
 Hollywood FL 33020-6760

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Construction Estimator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.82

Date of Receipt

10 / 30 / 2015

Transaction ID : AD584BB3D14A3423CB11

Amount of Each Receipt this Period

34.62

Payroll Deduction: \$34.62/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 46
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Douglas S Maggio

Mailing Address 950 Golf View Ct

City State Zip Code
Dacula GA 30019-6734

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Fresenius Medical Care NA Senior Director Business Development

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
254.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : AA78449FC7D484C6A810

Amount of Each Receipt this Period

23.10

Payroll Deduction: \$23.10/

Full Name (Last, First, Middle Initial)

B. Jayanta Ray

Mailing Address 5215 N O Connor Blvd
Ste 1100

City State Zip Code
Irving TX 75039-3739

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Fresenius Medical Care NA VP Finance

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : A20FDD5AEC7AC4934847

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

C. Richard Alderson

Mailing Address 1 Cityplace Dr

City State Zip Code
Saint Louis MO 63141-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Fresenius Medical Care NA Regional Vice President

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : ACD27CD51CB4E4F1BBA1

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Brian Silva

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP, Human Resources & Admin

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4230.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AD2514C5070E54FDDBC8

Amount of Each Receipt this Period

384.62

Payroll Deduction: \$384.62/

Full Name (Last, First, Middle Initial)

B. Mary Jo DavisMailing Address 1 Westbrook Corporate Ctr
Ste 1000

City

Westchester

State

IL

Zip Code

60154-5700

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Business Development

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AF7CC2C3B1C3D410EB52

Amount of Each Receipt this Period

24.00

Payroll Deduction: \$24.00/

Full Name (Last, First, Middle Initial)

C. Deborah HarveyMailing Address 100 Galleria Pkwy SE
Ste 500

City

Atlanta

State

GA

Zip Code

30339-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Senior Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AACEC7BD6FD2F4766AC7

Amount of Each Receipt this Period

300.00

Payroll Deduction: \$300.00/

SUBTOTAL of Receipts This Page (optional)..... ►

708.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Nicholas BrownleeMailing Address 1875 I St NW
FI 12

City	State	Zip Code
Washington	DC	20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

President SRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4230.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A86C4897DA98D4C4996D

Amount of Each Receipt this Period

384.60

Payroll Deduction: \$384.60/

Full Name (Last, First, Middle Initial)

B. Drew David

Mailing Address 2282 Floral Ridge Dr

City	State	Zip Code
Dacula	GA	30019-7214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Market Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : ABCF934BDE1CE440B81C

Amount of Each Receipt this Period

23.08

Payroll Deduction: \$23.08/

Full Name (Last, First, Middle Initial)

C. Judith Moran

Mailing Address 920 Winter St

City	State	Zip Code
Waltham	MA	02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2015

Transaction ID : A052CDB7D396A4B77B29

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ►

446.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Perritano

Mailing Address 111 E Elizabeth St

City
Clinton

State
NC

Zip Code
28328-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.36

Date of Receipt

10 / 30 / 2015

Transaction ID : AE8E1E291230A42F7AED

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

B. Erma Hall

Mailing Address 920 Winter St

City
Waltham

State
MA

Zip Code
02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A6950DE13F0CC423791F

Amount of Each Receipt this Period

76.00

Payroll Deduction: \$76.00/

Full Name (Last, First, Middle Initial)

C. Kimberly Tecca

Mailing Address 1402 Modeste Dr

City
League City

State
TX

Zip Code
77573-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A413FB2BB1C28441595A

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Joseph H Johnston

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Sr VP of Biomedical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

10 / 30 / 2015

Transaction ID : AB95F033007FF4FDBBC9

Amount of Each Receipt this Period

50.00

Payroll Deduction: \$50.00/

Full Name (Last, First, Middle Initial)

B. David Cariello

Mailing Address 2219 Hollywood Blvd, Suite 101

City

Hallandale

State

FL

Zip Code

33009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP of Real Estate & Construction Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

10 / 30 / 2015

Transaction ID : A03DFBD53F97B439DA63

Amount of Each Receipt this Period

76.92

Payroll Deduction: \$76.92/

Full Name (Last, First, Middle Initial)

C. Kim Sonnen

Mailing Address 1875 I St NW
 FI 12

City

Washington

State

DC

Zip Code

20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

SVP Marketing & Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2860.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A7684E618439944CB9F4

Amount of Each Receipt this Period

260.00

Payroll Deduction: \$260.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

386.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 46

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Robert Levin

Mailing Address 315 E 62nd St
 FL 4

City State Zip Code
 New York NY 10065-7767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 30 / 2015

Transaction ID : A060F1BD2FDEF4408914

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. David Roder

Mailing Address 920 Winter St

City State Zip Code
 Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 30 / 2015

Transaction ID : AE46A1C33AF704F8DAE6

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. Julia Brennan

Mailing Address 8 King Rd

City State Zip Code
 Rockleigh NJ 07647-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Business Relations Spectra Labs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

10 / 30 / 2015

Transaction ID : AA702A814008F4464A46

Amount of Each Receipt this Period

40.00

Payroll Deduction: \$40.00/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 46
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Donna McCarthy

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2538.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A27F5C8C85454407CA2F

Amount of Each Receipt this Period

230.76

Payroll Deduction: \$230.76/

Full Name (Last, First, Middle Initial)

B. Wendy Schrag

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director, Advocacy & Gov Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A73B7C491F28E4A948CD

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

C. David Gillon

Mailing Address 100 Galleria Pkwy SE
Ste 500

City State Zip Code
Atlanta GA 30339-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director Market Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : A4AB850FF864B4AF9808

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

299.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 46

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jody MacDonald

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AD4FCF877C0914C12825

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Joseph Ruma

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

VP Development Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : A3BC347546CE845BD899

Amount of Each Receipt this Period

60.00

Payroll Deduction: \$60.00/

Full Name (Last, First, Middle Initial)

C. James Pearce

Mailing Address 1875 I St NW

FI 12

City

Washington

State

DC

Zip Code

20006-5409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

RQM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : AE8C97ED1CCDA4FD4834

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 46
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Michael Tully

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Mgr Corp Systems

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A6686830559FD4B5183F

Amount of Each Receipt this Period

30.00

Payroll Deduction: \$30.00/

Full Name (Last, First, Middle Initial)

B. Sandra Geraci

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director of Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A0E2F6A2826B24EA3AA7

Amount of Each Receipt this Period

80.00

Payroll Deduction: \$80.00/

Full Name (Last, First, Middle Initial)

C. Anthony Hayes

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Group Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A333916568C1F4F51B57

Amount of Each Receipt this Period

62.00

Payroll Deduction: \$62.00/

SUBTOTAL of Receipts This Page (optional)..... ►

172.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 41 OF 46
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline Wenzler

Mailing Address 920 Winter St

City

Waltham

State

MA

Zip Code

02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : ABFA4B09ACA22424A8B1

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

B. Keith Alderman

Mailing Address 5268 E Raines Rd

City

Memphis

State

TN

Zip Code

38118-7015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : A1DE2AEB91030441F87C

Amount of Each Receipt this Period

20.00

Payroll Deduction: \$20.00/

Full Name (Last, First, Middle Initial)

C. Richard Stotz

Mailing Address 3500 Lacey Rd
Ste 900

City

Downers Grove

State

IL

Zip Code

60515-5442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fresenius Medical Care NA

Occupation

Regional Vice President

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : ADCB7A4B730864694943

Amount of Each Receipt this Period

38.46

Payroll Deduction: \$38.46/

SUBTOTAL of Receipts This Page (optional)..... ▶

78.46

TOTAL This Period (last page this line number only)..... ▶

7552.29

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 46
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Fresenius Medical Care North America

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : A2B1A0F2591DF468EA01

Amount of Each Receipt this Period

173.05

Reimbursement of Bank Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.05

173.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Global Payments

Mailing Address 10705 Red Run Blvd

City	State	Zip Code
Owings Mills	MD	21117-5134

Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2015

Transaction ID : BECE2DA8C7D85433EAC7

Amount of Each Disbursement this Period

173.05

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

173.05

173.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Blumenthal For ConnecticutMailing Address C/O Cacace Tusch & Santagata
777 Summer St Suite 103City State Zip Code
Stamford CT 06901Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. Richard BlumenthalOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼
Convention2016

State: CT

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Transaction ID : BB257C25D20E94E93ACC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends Of John Thune

Mailing Address PO Box 841

City State Zip Code
Sioux Falls SD 57101Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. John ThuneOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : B320AB90CD031449E8F3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends for Jim McDermott

Mailing Address PO Box 21786

City State Zip Code
Seattle WA 98111Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Jim A. McDermottOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : B7B355C1636534B1688F

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Jason Smith For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Mailing Address PO Box 1324

City	State	Zip Code
Cape Girardeau	MO	63702

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Jason T. Smith

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: MO	District: 08

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type**Transaction ID : B4F18DBC23B7B4DF4839**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Renee Ellmers For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2015

Mailing Address PO Box 99567

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Renee L. Ellmers

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NC	District: 02

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type**Transaction ID : B6347AC57C31041F38D4**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Blumenthal For Connecticut

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Mailing Address C/O Cacace Tusch & Santagata
777 Summer St Suite 103

City	State	Zip Code
Stamford	CT	06901

Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. Richard Blumenthal

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CT	District:

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Category/
Type**Transaction ID : BA254B48083AE479AB4A**

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 46

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

Full Name (Last, First, Middle Initial)

A. Guthrie For Congress

Mailing Address PO Box 9639

City	State	Zip Code
Bowling Green	KY	42102

Purpose of Disbursement
Direct Contribution

Candidate Name

Rep. Brett GuthrieOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2015

Transaction ID : BDBB811C134424D34A87

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Friends Of John Thune

Mailing Address PO Box 841

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement
Direct Contribution

Candidate Name

Sen. John ThuneOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : B1E74CF45F57B439AA1F

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Making America Prosperous PAC

Mailing Address PO Box 2485

City	State	Zip Code
Springfield	VA	22152485

Purpose of Disbursement
Direct Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2015

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Transaction ID : BDE9B8A508E844ABDB5F

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

16500.00
